

Please type a plus sign (+) inside this box → 

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 393032038500

First Inventor Shinya SAKURADA

Title AUTOMATIC PERFORMANCE APPARATUS

Express Mail Label No. EV147810281US

## CERTIFICATE OF MAILING BY "EXPRESS MAIL"

Express Mail Label No.: EV147810281US

Date of Deposit: June 26, 2003

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated above and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313.

Marco Jimenez

21956/608713

### APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

**ADDRESS TO:** Commissioner for Patents  
 Mail Stop Patent Application  
 P.O. Box 1450, Alexandria, VA 22313-1450

1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small>	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27.</small>	8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small>
3. <input checked="" type="checkbox"/> Specification <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"> <li>- Descriptive title of the Invention</li> <li>- Cross Reference to Related Applications</li> <li>- Statement Regarding Fed sponsored R &amp; D</li> <li>- Reference to sequence listing, a table, or a computer program listing appendix</li> <li>- Background of the Invention</li> <li>- Brief Summary of the Invention</li> <li>- Brief Description of the Drawings (if filed)</li> <li>- Detailed Description</li> <li>- Claim(s)</li> <li>- Abstract of the Disclosure</li> </ul>	a. <input type="checkbox"/> Computer Readable Form (CRF)
4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) <small>[Total Sheets 7]</small>	b. <input type="checkbox"/> Specification Sequence Listing on: <ul style="list-style-type: none"> <li>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</li> <li>ii. <input type="checkbox"/> paper</li> </ul>
5. <input checked="" type="checkbox"/> Oath or Declaration <small>[Total Pages 3]</small>	c. <input type="checkbox"/> Statements verifying identity of above copies
a. <input checked="" type="checkbox"/> Newly executed (original or copy)	9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small>	10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <small>(where there is an assignee)</small>
i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)</small>	<input type="checkbox"/> Power of Attorney By Assignee
6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	11. <input type="checkbox"/> English Translation document (if applicable)
	12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449
	13. <input type="checkbox"/> Preliminary Amendment
	14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>Should be specifically itemized</small>
	15. <input type="checkbox"/> Certified Copy of Priority Document <small>(if foreign priority is claimed)</small>
	16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
	17. <input type="checkbox"/> Other _____

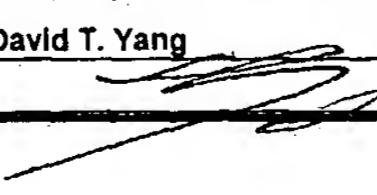
**18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:**

Continuation     Divisional     Continuation-in-part (CIP)    of prior application No. \*

Prior application information: Examiner \*    Group / Art Unit: \*

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. This incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

### 19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label		 * 2 5 2 2 4 *		or <input type="checkbox"/> Correspondence address below	
(Insert Customer No. or Attach bar code label here)					
Name	David L. Fehman				
	Morrison & Foerster				
Address	555 W. 5th Street, 35th Floor				
City	Los Angeles	State	CA	Zip Code	90013
Country	US	Telephone	(213) 892-5601	Fax	(213) 892-5454
Name (Print/Type)	David T. Yang			Registration No. (Attorney/Agent)	44,415
Signature				Date June 26, 2003	

||  
a-665007

# FEE TRANSMITTAL FOR FY 2003

Patent fees are subject to annual revision.

 Applicant Claims Small Entity Status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$790.00)

Complete if Known	
Application Number	Not yet assigned
Filing Date	Concurrently herewith
First Named Inventor	Shinya SAKURADA
Examiner Name	Not yet assigned
Group Art Unit	Not yet assigned
Attorney Docket No.	393032038500

## METHOD OF PAYMENT

 Check  Credit Card  Money Order  Other

Deposit Account Number

03-1952

Deposit Account Name

Morrison &amp; Foerster LLP

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below  Credit any overpayments  
 Charge any additional fee(s) required Under 37 CFR 1.16 and 1.17  
 Charge fee(s) indicated below, except for the filing fee

to the above-identified deposit account

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee (\$)	Fee (\$)
1001	750	2001	375
1002	330	2002	160
1003	520	2003	260
1004	750	2004	375
1005	160	2005	80
SUBTOTAL (1)		(\$750.00)	

## 2. EXTRA CLAIM FEES

Total Claims	-	20	=	0	x	18	=	\$0
Independent Claims	3	-	3	=	0	x	84	= \$0

## Multiple Dependent

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1202	18	2202	9
1201	84	2201	42
1203	280	2203	140
1204	84	2204	42
1205	18	2205	9
SUBTOTAL (2)		(\$0)	

\*\* or number previously paid, if greater; For Reissues, see above.

## 3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1051	130	2051	65
1804	920*	1804	920*
1805	1,840*	1805	1,840*
1251	110	2251	55
1252	410	2252	205
1253	930	2253	465
1254	1,450	2254	725
1255	1,970	2255	985
1401	320	2401	160
1402	320	2402	160
1403	280	2403	140
1451	1,510	1451	1,510
1452	110	2452	55
1453	1,300	2453	650
1501	1,300	2501	650
1502	470	2502	235
1503	630	2503	315
1460	130	1460	130
1807	50	1807	50
1806	180	1806	180
8021	40	8021	40
1809	750	2809	375
1810	750	2810	375
1801	750	2801	375
1802	900	1802	900
Other fee (specify)			

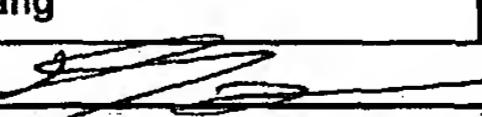
\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$40.00)

## SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	David T. Yang	Registration No. (Attorney/Agent)	44,415	Telephone	(213) 892-5587
Signature				Date	June 26, 2003

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Alexandria, VA 22313 DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313.

la-665011